ITEMIZED DISBURSEMENTS		Use seperate schedule(s) for each category of the	FOR LINE (check only	
		Detailed Summary Page		17 18 19a 19b 20a 20b 20c X 21
	y Information copied from such Reports and State or commercial purposes, other than using the nan			
\rangle	NAME OF COMMITTEE (In Full) Diane E Watson For Congress			
Α.	Full Name (Last, First, Middle Initial) Lois Murphy For Congress			Transaction ID: SB2100000000004378 Date of Disbursement
	Mailing Address 14 W Marshall St			06
	City Norristown	State Zip Code PA 19401		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name Lois Murphy		011 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
		ement For: 2006 Primary X General Other (specify)	Турс	
В.	Full Name (Last, First, Middle Initial) Hafen For Congress		Transaction ID: SB2100000000004378 Date of Disbursement	
	Mailing Address PO Box 530996			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & I & I \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & G \end{bmatrix}$
	City Henderson	State Zip Code NV 89053		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name Tessa Hafen		011 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: X House Senate President State: NV District: 03	ement For: 2006 Primary X General Other (specify)		
	Full Name (Last, First, Middle Initial) Friends Of Tammy Duckworth		Transaction ID: SB2100000000004579 Date of Disbursement	
	Mailing Address 416 W 22nd St			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & I & I \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & G \end{smallmatrix} $
	City Lombard	State Zip Code IL 60148		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution		012	1000.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President State: District:	ement For: Primary General Other (specify) ▼		
	UBTOTAL of Disbursements This Page (optional)			3000.00